

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>CHANGE OF CORRESPONDENCE ADDRESS Application</b>  Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	09/914,436
	Filing Date	08/27/2001
	First Named Inventor	HOPPE, Lutz
	Art Unit	1732
	Examiner Name	EASHOO, MARK
	Attorney Docket No.	WC005532

Please change the Correspondence Address for the above-identified application to:

☒ The address associated with Customer Number: 

OR

<input type="checkbox"/> Firm or Individual Name					
Address					
City		State		Zip	
Country					
Telephone				Email	

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

- ☐ Applicant/Inventor
- ☒ Assignee of record of the entire interest.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☐ Attorney or agent of record. Registration Number \_\_\_\_\_
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number \_\_\_\_\_

Signature

Typed or Printed Name

Brian J. Hubbard

Date

12/6/07

Telephone

1-989-636-6007

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 3 forms are submitted.